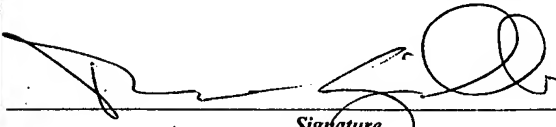



1/PW

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 17375	
Applicant(s): Tsutomu Okada						
Application No. 10/764,893	Filing Date January 26, 2004	Examiner Beverly Meindl Flanagan	Customer No. 23389	Group Art Unit 3739	Confirmation No. 9692	
<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; border-radius: 50%; padding: 10px; text-align: center; margin-right: 10px;"> DEC 12 2005 PATENT & TRADEMARK OFFICE </div> <div> Invention: ENDOSCOPIC MUCOUS MEMBRANE RESECTION INSTRUMENT AND ENDOSCOPIC MUCOUS MEMBRANE RESECTION METHOD </div> </div>						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	9 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	6 -	6 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 <div style="border: 1px solid black; padding: 5px; width: fit-content; margin-left: auto;">Signature</div>			Dated: December 7, 2005			
Thomas Spinelli Registration No. 39,533			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <div style="text-align: center;"> 12/7/2005 (Date) </div> <div style="text-align: center; margin-top: 20px;">  Signature of Person Mailing Correspondence </div> <div style="text-align: center; margin-top: 5px;"> Thomas Spinelli Typed or Printed Name of Person Mailing Correspondence </div>			
CC:						



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Tsutomu Okada
Serial No: 10/764,893
Filed: January 26, 2004
For: ENDOSCOPIC MUCOUS
MEMBRANE RESECTION
INSTRUMENT AND
ENDOSCOPIC MUCOUS
MEMBRANE RESECTION
METHOD
Examiner: Beverly Meindl Flanagan
Art Unit: 3739
Docket: 17375
Dated: December 7, 2005

Conf. No.: 9692

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE

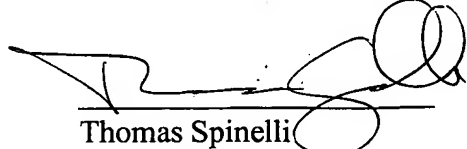
Sir:

In response to the Official Action dated September 13, 2005, Applicant respectfully requests reconsideration of the above-identified application in light of the following amendments and remarks:

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box, Alexandria, VA 22313-1450 on the date set forth below.

Dated: December 7, 2005


Thomas Spinelli